



DEPARTMENT OF DEVELOPMENT SERVICES

212 West Main Street
Inverness, FL 34450-4801
(352) 726-3401

Building & Zoning Division
Fax (352) 726-5473

SUBJECT: FICTITIOUS NAME ACT: "FS 865.09"

(1) I _____

Declare that I have registered with the Division of corporations of the Department of the State for the Fictitious Name Act.

(2) I do not have to comply with the Fictitious Name Act because:

Failure to comply with the Fictitious Name Registration Provisions of Section 865.09 Florida Statutes, is a misdemeanor of the second degree and punishable as provided in Section 775.082 or Section 755.083, Florida Statutes.

I understand and that by signing this form, that if any of the above is not true, I will be guilty of a misdemeanor of the second degree.

Signature

Date